

RECEIVED
CENTRAL FAX CENTER
APR 10 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/642,809 Confirmation No. : 3126
Applicant(s) : Herbert E.M. Viggh
Filed : 08/15/2003
TC/AU : 2624
Examiner : Johns, Andrew W.
Docket No. : AFB00634
Customer No. : 26902

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated 02/16/2007, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

**RECEIVED
CENTRAL FAX CENTER**

APR-10-2007 12:31

AFMCLO/JAZ

APR 10 2007

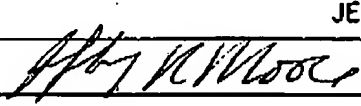
937 255 3733

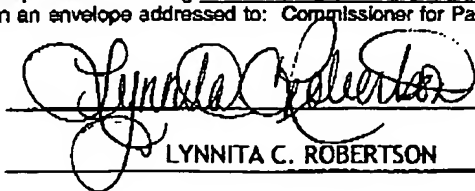
P.01/05

Substitute PTO/SB/21
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/642,809	
	Filing Date	August 15, 2003	
	First Named Inventor	Herbert E.M. Viggh	
	Art Unit	2624	
	Examiner Name	Andrew W. Johns	
Total Number of Pages in this Submission	5	Attorney Docket Number	AFB 634

ENCLOSURES <small>(check all that apply)</small>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to a Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <small>(please identify below):</small>
Remarks: There is no fee associated with this filing.		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm or Individual Name	JEFFREY R. MOORE		
Signature			
Date	April 10, 2007	Reg. No.	45,855

CERTIFICATE OF TRANSMISSION / MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Signature	
Typed or printed name	LYNNITA C. ROBERTSON
Date	April 10, 2007